

CLAIMS ONLY						Application Number <u>10807848</u>	Filing Date			
						Applicant(s)				
* May be used for additional claims or amendments										
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend				
1	I						51			
2		I					52			
3		I					53			
4			I				54			
5			I				55			
6			I				56			
7			I				57			
8		I					58			
9		I					59			
10	I		I				60			
11		I					61			
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15		I					65			
16		I					66			
17		I					67			
18	I		I				68			
19	I		I				69			
20	I		I				70			
21	I		I				71			
22	I		I				72			
23	I		I				73			
24	I		I				74			
25	I		I				75			
26	I		I				76			
27	I		I				77			
28	I		I				78			
29	I		I				79			
30	I		I				80			
31							81			
32							82			
33							83			
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41							91			
42							92			
43							93			
44							94			
45							95			
46							96			
47							97			
48							98			
49							99			
50							100			
Total Indep	5		5				Total Indep			
Total Depend	25		25				Total Depend			
Total Claims	30		30				Total Claims			